

JIP C105
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TRANSMITTAL FORM

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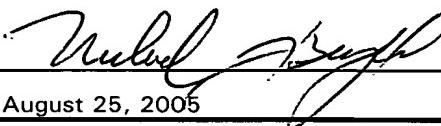
	Application Number 10/758,479 Filing Date January 15, 2004 First Named Inventor Gerhard GUMPOLTSBERGER Group Art Unit 3681 Examiner Name Tisha D. LEWIS Total No. of Pages in this Submission: 6 Attorney Docket Number ZAHFRI P596US
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ENCLOSURES *(check all that apply)*

<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Response <ul style="list-style-type: none"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <i>(in Duplicate)</i> <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <ul style="list-style-type: none"> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 	<ul style="list-style-type: none"> <input type="checkbox"/> Assignment papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund 	<ul style="list-style-type: none"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i> <p style="margin-left: 20px;">Postcard</p>
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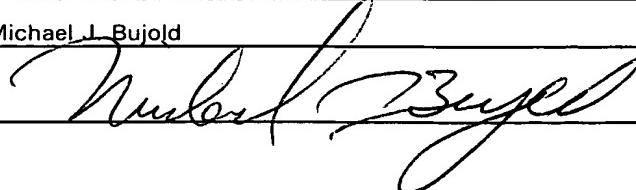
REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Michael J. Bujold DAVIS & BUJOLD, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
Signature		
Date	August 25, 2005	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 25, 2005.

Type or printed name	Michael J. Bujold
Signature	
Date: August 25, 2005	

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O I P E J C
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RECEIVED
U.S. PATENT AND TRADEMARK OFFICE**FEE TRANSMITTAL****for FY 2005**

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT: \$450

Complete if Known

Application No. Filing Date First Named Inventor Examiner Name Group Art Unit	10/758,479 January 15, 2004 Gerhard GUMPOLTSBERGER Tisha D. LEWIS 3681
Attorney Docket No.	ZAHFRI P596US

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number: 04-0213

Deposit Account Name: DAVIS & BUJOLD, P.L.L.C.

The Director is authorized to: (check all that apply)

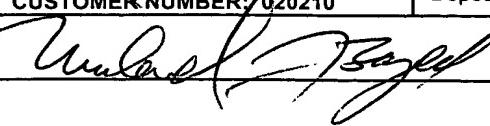
- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified account.

FEE CALCULATION (continued)

FEE CALCULATION					3. ADDITIONAL FEES					Fee Paid
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1011	1000	2011	500	Utility filing fee	1051	130	2051	65	Surcharge-late filing fee/oath	
1012	430	2012	215	Design filing fee	1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet Non-English specification	
1013	660	2013	330	Plant filing fee	1053	130	1053	130		
1014	1400	2014	700	Reissue filing fee	1812	2,520	1812	2,520	For filing a request for re-examination	
1005	200	2005	100	Provisional filing fee	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
SUBTOTAL (1)					1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Ext.for reply w/in 1 mon						
1252	450	2252	225	Ext.for reply w/in 2 mon					\$450	
1253	1,020	2253	510	Ext.for reply w/in 3 mon						
1254	1,590	2254	795	Ext.for reply w/in 4 mon						
1255	2,160	2255	1,080	Ext.for reply w/in 5 mon						
1401	500	2401	250	Notice of Appeal						
1402	500	2402	250	Filing a Brief in support of an appeal						
1403	1,000	2403	500	Request for oral hearing						
SUBTOTAL (1)					1451	1,510	1451	1,510	Petition to institute a public use proceeding	
2. CLAIMS					1452	500	2452	250	Petition to revive - unavoidable	
Total Claims	-20*	=	\$ 50 (\$ 25)	x =	1453	1,500	2453	750	Petition to revive - unintentional	
Ind. Claims	- 3	=	\$200 (\$100)	x =	1501	1,400	2501	700	Utility issue fee (for reissue)	
Multiple Dependent	=	=	\$360 (\$180)	x =	1502	800	2502	400	Design issue fee	
** or number previously paid, if greater; For Reissues, see below					1503	1,100	2503	550	Plant issue fee	
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	1807	50	1807	50	Petition related to provisional applns.	
1202	50	2202	25	Claims in excess of 20	1806	180	1806	180	Submission of Info.Disclo.Stmt.	
1201	200	2201	100	Independent claims in excess of 3	8021	40	8021	40	Recording ea. patent assignment per property (times No.of properties)	
1203	360	2203	180	Multiple dependent claim	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1204	200	2204	100	**Reissue independent claims over original patent	1810	790	2810	395	For ea.additional invention to be examined (37 CFR 1.129(b))	
1205	50	2205	25	**Reissue claims in excess of 20 and over original patent	1801	790	2801	395	Request for Cont.Exam.(RCE)	
SUBTOTAL (2)					1802	900	1802	900	Request for expedited examination of a design appln	
**or number previously paid, if greater; For Reissues, see above					Other fee (specify)				SUBTOTAL (3)\$450	

SUBMITTED BY

Completed (if applicable)

Typed or Printed Name	Michael J. Bujold CUSTOMER NUMBER: 020210	Registration No.	32,018	Telephone (603) 624-9220
		Deposit Acct. No.	04-0213	Fax: (603) 624-9229
Signature				Date: August 25, 2005